



Wife
(refund)

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 00-1016											
In re Application of Richard H. Sherman													
Application Number 09/853,288		Filed 5/11/2001											
For Chaotic Privacy System and Method													
Group Art Unit 2137	Examiner Tremayne M. Norris												
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table><tr><td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td>\$ _____</td></tr><tr><td><input checked="" type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td>\$ 1590.00</td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td>\$ _____</td></tr></table> <p><input checked="" type="checkbox"/> Applicant is a small entity under 37 CFR 1.9 and 1.27, therefore the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 510.00</p> <p>A small entity statement under 37 CFR 1.27:</p> <p><input type="checkbox"/> is enclosed.</p> <p><input type="checkbox"/> has already been filed in this application.</p> <p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number _____ I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> assignee of record of the entire interest.</p> <p><input type="checkbox"/> applicant.</p> <p><input checked="" type="checkbox"/> attorney or agent of record.</p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).</p> <p>Registration number if acting under 37 CFR 1.34(a) _____</p> <p>4/15/2005 Date</p> <p> Signature</p> <p>Kenneth W. Float Typed or printed name</p>				<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ _____	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ _____	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ _____	<input checked="" type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ 1590.00	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ _____												
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ _____												
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ _____												
<input checked="" type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ 1590.00												
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____												

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

5/31/2005 EFLORES 00000065 09853288

FC:1254

1590.00 OP

Adjustment date: 01/27/2006 CKHLOK
05/31/2005 EFLORES 00000065 09853288

01 FC:1254

-1590.00

Refund Ref: 01/27/2006 CKHLOK 0000149805

CHECK Refund Total: \$1590.00

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND												
1 Date of Request: <u>1-27-06</u>		2 Serial/Patent # <u>09/833,288</u>										
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT								
	Filing			\$								
	Amendment			\$								
<input checked="" type="checkbox"/>	Extension of Time	—	5/27/05	\$ 1,590. ⁸²								
	Notice of Appeal/Appeal			\$								
	Petition			\$								
	Issue			\$								
	Cert of Correction/Terminal Disc.			\$								
	Maintenance			\$								
	Assignment			\$								
	Other			\$								
<div style="border: 1px solid black; padding: 2px;"> <i>The law offices of Kenneth Float</i> <i>Attn: Kenneth Float</i> <i>2045 Hwy. 211 NW, #2F</i> <i>Braselton, GA 30517</i> </div>			7 TOTAL AMOUNT OF REFUND									
			\$ 1,590. ⁸²									
8 TO BE REFUNDED BY:												
10 REASON:		<input checked="" type="checkbox"/> Treasury Check <input type="checkbox"/> Credit Deposit A/C #:										
	Overpayment	9 <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>										
	Duplicate Payment											
<input checked="" type="checkbox"/>	No Fee Due (Explanation):											
<i>Ext. of time filed outside statutory pd. for reply.</i>												
11 REFUND REQUESTED BY:												
TYPED/PRINTED NAME: <u>Andrea Smith</u>		TITLE: <u>Pets. Exmr.</u>										
SIGNATURE: <u><i>Andrea Smith</i></u>		PHONE: <u>571-272-3226</u>										
OFFICE: <u>ROC. of Petitions</u>												
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****												
APPROVED: <u><i>Cathy K.</i></u>		DATE: <u>1/27/06</u>										

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
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